

DO/ EO WORKSHEET

Paralegal/ National Stage Division

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<input type="checkbox"/> Article 19 Amendments
<input checked="" type="checkbox"/> PCT/IPEA/409 IPER: <input type="checkbox"/> EP <input type="checkbox"/> JP <input type="checkbox"/> SE <input type="checkbox"/> AU
<input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> _____
<input type="checkbox"/> PCT/IPEA/409 IPER was NOT AVAILABLE at the time of
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<input type="checkbox"/> Annexes to 409
<input checked="" type="checkbox"/> Priority Document (s) No. <u>1</u> | <input type="checkbox"/> PCT/IB/331
<input type="checkbox"/> Request form PCT/RO/101
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<input type="checkbox"/> US <input type="checkbox"/> FR <input type="checkbox"/> CN <input type="checkbox"/> ES <input type="checkbox"/> RU <input type="checkbox"/> AT <input type="checkbox"/> KR <input type="checkbox"/> OTHER _____
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<input checked="" type="checkbox"/> Drawing Figure(s) - (# of drwgs. <u>4</u>)
<input type="checkbox"/> Translation of Article 19 Amendments
<input type="checkbox"/> entered <input type="checkbox"/> not entered:
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<input type="checkbox"/> replaced by Article 34 Amendment
<input type="checkbox"/> Annexes to 409
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<input type="checkbox"/> Application Data Sheet
<input type="checkbox"/> Power of Attorney/ Change of Address | <input checked="" type="checkbox"/> Preliminary Amendment(s) Filed on:
<u>12-19-05</u>
<input checked="" type="checkbox"/> Information Disclosure Statement(s) Filed on: <u>3/1/07</u>
<u>12-19-05</u>
<input type="checkbox"/> Assignment Document (forwarded to
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<input type="checkbox"/> Assignee PG Publication Notice
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<input type="checkbox"/> Verified Small Status Statement
<input checked="" type="checkbox"/> Oath/ Declaration (executed) <u>Feb 22, 2007</u>
<input checked="" type="checkbox"/> unsigned <input type="checkbox"/> no citizenship
<input type="checkbox"/> DNA Diskette <input type="checkbox"/> Sequence Listing
<input type="checkbox"/> Other: _____ |
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NOTES: ☐ I.A. used as Specification ☐ Other: _____

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Date of Completion of ALL requirements 2-22-07

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Date of Completion of DO/ EO 905 - Notification of Missing Requirements 1-18-2009

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Date of Completion of DO/ EO 916 - Notification of Defective Response

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